POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Hw		CY-41-01
O.I.P.E. CLASSIFIER		3 2	5/3
FORMALITY REVIEW	57	555	5/19/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim Final	Original	Date							Claim Final	Original	Date						Claim Final	Original	Date					
	1									51								101						
	2									52								102						
	3									53								103						
	4									54								104						
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	48									98								148						
	49									99								149						
	50									100								150						

If more than 150 claims or 10 actions
staple additional sheet here

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